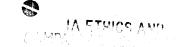
File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Reset Form



FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use On	ly
Comm. #	
Logged In	
Scanned	
Computer	····

2008 JUL -3 AM 9: 15

COMMITTEE NAME (Must be same as on Statement of Organ	nzauonj	, <u>, </u>		
Harney for Superviso	~	1 1 1	R-2	
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (2) (4)County Central Committee (5)County Candidate (6)City Candidate (8)County PAC (9)City PAC (10)School Botton Local Ballot Issue)State PAC (3)State Party ate (7)School Board or Other Politic	(Rev		DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY: Candidate Name	Political Party (if applicable)	Scan		
Office Sought	District (if Senate or House)	1 1	ted	
Late reports are subject to possible civil and criminal penalties. Purs SIGNATURE OF PERSON FILING REPORT	319 351-1954 TELEPHONE	• •		
(report date)	REPORT FOR (1) ELECTION Indicate by		ECTION YEAR	.
CHECK IF AMENDMENT TO REPORT DATED		Local Commit	ttees, enter Date	of Election
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.)		County & Loc which Election	al Committees, en is held JoH	nter County in
STATEMENT OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the confidence of the last reporting period or must be zero if this is first	ach on hand at the end	\$	4711.	3 2
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedu	le A) (*also see in-kind below)		<u>750</u>	
Schedule F: Loans Received total (Attach Schedule F	F)		6000	
Schedule H: Total Sales of Campaign Property (Attack	ch Schedule H)	•••••		
(Schedule H applies to Candidates' Comm	nittees Only) SUB-TOTAL	\$	1146	1.32
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule B: Expenditures total (Attach Schedule B) ((**also see debts and loans below	<i>ı</i>)	1051	5
Schedule F: Loan Repayments total (Attach Schedule	•	•		
CASH ON HAND at the end of this reporting period (if final repo	ort balance must be zero)	\$	946	,.32
**UNPAID BILLS (From Schedule D - Attach Schedule D)				
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched			115 .	75

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

8000,00

YES ____NO

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	CHECK THE POY
COMMITTEE NAME (Must be same as on Statement of Organization) Harney for Supervisor	CHECK THIS BOX II AMENDING FORM

SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS

Reset Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
may 21 2008	ID# CK#	Johna Cindy Stevens 52 Brentwood Lane Towa City 52245		\$ &5	
may 21 2008	ID# CK#	Jour City 52245 Jim Hayes 1142 E Court St Iowa Cety 522UD		100	
may 21 2008	ID# CK#	Dick meyers wood land thights Fowe City 52240		50	
June 5 2008	ID# CK#	Mike McKay		25	
June 5	CK# 1193	Iowa City Corporters		50 o	
may 24 2008	ID# CK#	Toma Betsy Kenefick		25	
7008	ID# CK#	Tom Den heny 161 Brentwood Dr Towa City		25	
	ID# CK#	•			
	CK#				
	ID# CK#				
			SUB-TOTAL		

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

TOTAL (if last page of this schedule)

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES			
	CK THIS BOX IF			

COMMITTEE NAME	(Must be	same as on Statement of Organization)
Harney	for	Supervisor

3/25 ID# Jehnson Corenty Donahien to 2008 CK# Democrats Johnson Co. Party	\$ 25
	\$ 25
=/ (ID# S / C +	ł i
Trint and	
2008 CK# Solon IA 52333	516-60
5/21 10# Press Citizen (2. + 180)	
5/23/ CK# Powa City Iowa 52240 Print ala	2994.90
6/ ID# W A D	
2108 CK# Ralone IA Print and	410
5/23 CK# Cedar Rupids Gazette Prent Ad	(/)
2008 CK# Celer Regrids IA.	720,40
5/28/ 10# Cedar Rapids Yozette Print and	
5/28/ 2008 CK# Cedar Rupleds ±4 Print and	1439.50
5/29/ ID# Iowa City Presscrips Print al	1:58.10
2008 CK# Fore City #A	1158110
6/2/ ID# Forea City Press Cetigen Dant and	0.15
2006 CK# Jowa City Sa Prent and	2209.15

SUB-TOTAL

9473-65

TOTAL (if last page of this schedule)

\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

 of	2
 •	
	of

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME	(Must be	same as on Statement of Organization)
Harney	for	Supervisor

DATE	CANDIDATE ID NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
(MM/DD/YR)	(if applicable) AND PAC	(Disbursement) WAS MADE		
	CHECK NUMBER	,		
4/21	ID#	Towa City Cress litery	Print ad	
2008	CK#	Iowa Cety #A	VANG CE	\$ 668.60
6/11/	ID#	Bonker's Advertising 2800 Huy 6 East 0	wire Sign frames	~ ~/
2008	CK#	Iowa City IA		45.06
4/20/	ID#	Iowa Ethics and Campaign Disclosure	Late Pee	_
2008	CK#	Bearer - Nes Moines IA		20
4/30/	ID#	Got Harney		
2008	CK#	Pat Harney June raiser expense (postage - 110 190; fool 172.35; Copy works	**************************************	307.69
~	ID#	172.35; Copy works		
	CK#	94,44)		
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			

TOTAL (if last page of this schedule)

SUB-TOTAL

\$ 1041.35 \$10515

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page 2 of 2

COMMITTEE NAME (Must be same as on Statement of Organization)				SCHEDULE IN-KIND		
				(Rev. 06/97) CONTRIBUTIONS		
Harn	ey for Supervisor	!	Reset Form	CHECK T AMENDIN		
DATE	MAME AND ADDRESS	RELATIONSHIP TO CANDIDATE	DESCRIPTION OF IN KIND	ESTIMATED FAIR MARKET	√ IF FOR FUND-RAISER	
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	* (if applicable)	CONTRIBUTION	VALUE \$	CONTRIBUTION	
5/17/08	Tom Wall 5324 morse Pa NE Iowa City IA 52240		Pork for fund raiser	115.75		
	•					
,						
			SUB-TOTAL	\$		
			TOTAL (if last page of this schedule)	\$ 115:75		
committee. Roby marriage).	w requires candidates to disclose the relationship of a elationship must be shown to the third degree of consistence (See Page 2 of forms packet.) If surname of contribuship, enter "not applicable" in the relationship colum	sanguinity (blood rela outor is the same as o	itives) and affinity (relative	ne Page	of (for Schedule E)	

	BACK OF FORM		RESET	SCHEDULE	
	pe same as on Statement of Organization)			(Rev. 02/08)	LOANS
tarney fo	or Supervisor			(1(6). 02/00)	& REPAID
E: This schedule repor	ts money loaned to the committee which is deposited in	the committee	account.		THIS BOX NG FORM
AL UNPAID LOANS FF	ROM <u>LAST</u> REPORTING PERIOD \$ <u> </u>				
	NNS RECEIVED <u>THIS</u> REPORTING PERIOD of loan, such as a bank, must be shown if a third party is	involved. Inclu	de loans from candi	date's personal i	funds.)
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)		LATIONSHIP TO DATE (If Applicable	AMOUNT (OF LOAN
	et Harney 771 Hwy I NE Owa City IA 5224			\$ 5,00) D
6/2/08 2	owa City IA 5224 lat Horney 771 Hwy INE Fowa City IA 5224	0		1,00	D 0
Z 80'	Towa City IA 5224				
		IOIAL	. (PART I)	\$ 6,0	
	OAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIO must be reported on Schedule E — In-kind Contribution			•	
(Loans forgiven	must be reported on Schedule E In-kind Contribution NAME AND ADDRESS OF LENDER	s.)	ELATIONSHIP TO IDATE* (If Applicab	AMOUNT	
(Loans forgiven	must be reported on Schedule E In-kind Contribution	s.)	ELATIONSHIP TO IDATE* (If Applicab	AMOUNT	
(Loans forgiven	must be reported on Schedule E In-kind Contribution NAME AND ADDRESS OF LENDER	s.)		AMOUNT	
(Loans forgiven	must be reported on Schedule E In-kind Contribution NAME AND ADDRESS OF LENDER	s.)		AMOUNT	
(Loans forgiven	must be reported on Schedule E In-kind Contribution NAME AND ADDRESS OF LENDER	s.)		AMOUNT	
(Loans forgiven	must be reported on Schedule E In-kind Contribution NAME AND ADDRESS OF LENDER	s.)		AMOUNT	
(Loans forgiven	must be reported on Schedule E In-kind Contribution NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	s.)	IDATE* (If Applicab	AMOUNT	
(Loans forgiven	must be reported on Schedule E In-kind Contribution NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	S.) RECAND SH REPAYMENT OTAL LOANS	IDATE* (If Applicable) ITS (PART II) FORGIVEN	AMOUNT	REPAID